## Nebraska's State Suicide Prevention Plan

Nebraska's State Suicide Prevention Committee (NSSPC) embrases the aim and model proposed by the former <u>United States Surgeon General</u>, David Satcher, M.D., in the 2001 publication <u>National Strategy for Suicide Prevention: Goals and Objectives for Action</u>. The NSSPC enforces an open membership policy with a goal of promoting local, grassroots initatieves through the 2005-2006 Nebraska State Suicide Prevention Plan.

#### 2005-2006 Nebraska State Suicide Prevention Plan

The Nebraska State Suicide Prevention Committee (NSSPC) has three subcommittees, <u>Awareness</u>, <u>Intervention</u>, and <u>Methodology</u>. The following is the 2005-2006 state plan as developed by these committees and approved by the overall NSSPC.

# AWARENESS

Promote Awareness that suicide is a preventable public health problem.

- Disseminate information about resources and web sites available through faith based organization, service clubs, non profits, corporations and occupational health through private, public, and non-profit partners in the NSSPC and broader community
- Continue to reach out to public/private schools and colleges with special emphasis to the age group of 15-24 by including them in NSSPC activities
- Reach out to the elderly through <u>Aging Services</u> by the dissemination of educational materials on depression and suicide prevention
- Provide State and Regional prevention programs with information about suicide prevention
- Work with public health and <u>Cooperative Extension</u> to more fully involve youth organizations in suicide prevention activities.
- Build on "<u>Project Relate</u>" activities to reduce stigma associated with seeking help for mental health problems
- Engage local foundations to promote activities associated with mental illness awareness week, suicide prevention month, and mental health month

Increase access to community linkages with MH/SA services:

 Provide a link on the HHSS Suicide Prevention website for <u>free</u> depression screening provided by <u>BryanLGH Medical Center</u>  <u>Interchurch Ministries of Nebraska</u> will publicize notice of screening availability to churches and encourage parish health nurses to include depression screening as wellness activities

## **♦** INTERVENTION

### Develop and implement suicide prevention programs

- Empower organizations to seek <u>American Association of Suicidology</u> (AAS) national certification for crisis centers by encouraging Region V to educate the other Regions on the AAS Accreditation process
- Encourage organizations to become networked under a single, toll-free telephone number, <u>1.800.SUICIDE</u> (784-2433) through the Kristin Brooks National Hopeline Network
- Put links to <u>AAS</u> and <u>Hopeline Network</u> on the HHSS Suicide Prevention website
- Expand Suicide Prevention Curriculum (SPC) training to law enforcement officers and fire personnel to include mandated training of new officers and renewed information for veteran officers

### Develop and promote effective practices

- Continue to promote the use of the Teen Screen program by medical facilities that serve youth
- Continue use of Nebraska's Green Line program for juvenile residential settings
- Continue to update and distribute SPC via <u>NEBHANDS</u> website

# **♦** METHODOLOGY

#### Promote and support research on suicide and suicide prevention

- Promote evaluation on the Green Line Program to support its inclusion as evidence based practice
- Promote University of Nebraska research on suicide prevention, and Selective Serotonin Reuptake Inhibitors (SSRIs) role in suicide prevention

#### Improve and expand surveillance systems

• Encourage Public Health integration of Mental Health data on suicide attempts, Regional Center admissions and Crisis Center admissions

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